PTO/SB/17 (10-07)
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FEE TRANSMITTAL FOR FY 2008  FEE TRANSMITTAL FOR FY 2008  Applicant claims small entity status. See 37 CFR 1.27  Art Unit  2824  TOTAL AMOUNT OF PAYMENT  (\$) 405.00  Attorney Docket No.  3672-0144P  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None  Check Ordeit Card Money Order  None Other (please identify):  Check Ordeit Card Money Order  None Other (please identify):  Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayments of (see), under 37 CFR 1.6 and 1.17  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Pee (\$) Fee (\$	FEE TRANSMITTAL			Complete if Known					
FILING FEES ASSINITAL FOR FY 2008    Filing Date				ation Num					
First Named Inventor   Michael O, THOMPSON   Examiner Name   J. H. Hur   2824   Art Unit   2824   Ar						May 7, 2002			
Examiner Name					entor	Michael O. THOMPSON			
METHOD OF PAYMENT (check all that apply)						J. H. Hur			
METHOD OF PAYMENT (check all that apply)	X Applicant claims small entity sta	Art Unit			2824				
Check	TOTAL AMOUNT OF PAYMENT (\$) 405.00			y Docket I	No.	3672-0144P			
Deposit Account   Deposit Account Number   D2-2448   Deposit Account Name   Birch, Stewart, Kolasch & Birch, For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee   X   Charge fee(s) indicated below, except for the filling fee   X   Charge any additional fee(s) or underpayments of   X   Credit any overpayments   X   Small Entity   Small	METHOD OF PAYMENT (check all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below									
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   X   Charge any additional fee(s) or underpayments of   X   Credit any overpayments	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch,								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    FEE CALCULATION	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Ree(s) under 37 CFR 1.16 and 1.17	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   SMAll Entity   Small Entity   Fee (\$)   Fee (									
Procession   Pro	FEE CALCULATION								
Application Type					~~\\ A B B II				
Utility		Small Entity	Sma	II Entity		<b>Small Entity</b>	Food I	Poid (\$)	
Design   210   105   100   50   130   65							rees	alu (a)	
Plant				- 1					
Reissue 310 155 510 255 620 310  Provisional 210 105 0 0 0 0 0  2. EXCESS CLAIM FEES									
Provisional 210 105 0 0 0 0 0 0 0 0 2. EXCESS CLAIM FEES									
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims Extra Claims Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  Fee Paid (\$)  A -7 = x = x = HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$)									
Fee Claims over 20 (including Reissues)  Each claim over 3 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  18  -40 =		103	U	O	v	v		Small Entity	
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  A	Fee (\$)								
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  4		sues)					50	25	
Total Claims    Extra Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims						210	105		
Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (\$)   Fee Paid (\$)	Multiple dependent claims								
Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  4									
Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  4   -7 =					<u>F</u>	ee (\$)	ree Paid (S	<u>n</u>	
4 -7 = x = HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x =									
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Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 405.00									
SUBMITTED BY									
Registration No.	Signature	2-12 98	Registrat	ion No.	29,680	Telephone	(703) 20	5-8000	
Name (Print/Type) Michael K. Mutter Date October 31, 2007		rye - Joseph	(Attorney/	Agent)	,	Date			